PTO/SB/06 (08-03)
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| -               | Substitute for Form PTO-875                                             |                     |              |                   |                      |                    |                 |                                                  | /      | 0/66                                  | 40               |
|-----------------|-------------------------------------------------------------------------|---------------------|--------------|-------------------|----------------------|--------------------|-----------------|--------------------------------------------------|--------|---------------------------------------|------------------|
|                 | CLAIMS AS FILED - PART I (Column 1) (Column 2)                          |                     |              |                   |                      |                    | SMALL           | ENTITY                                           | OR     |                                       | R THAN<br>ENTITY |
|                 | FOR NUMBER FILED                                                        |                     |              |                   | NUMB                 | ER EXTRA           | RATE            | FEE                                              |        | RATE                                  | FEE              |
|                 | SIC FEE<br>CFR 1.16(a))                                                 |                     | l            |                   |                      |                    |                 | \$                                               | OR     |                                       | \$               |
|                 | TAL CLAIMS<br>CFR 1.16(c))                                              | フ                   | minus 20 = · |                   |                      |                    | x s =           |                                                  | 1      | x \$ =                                |                  |
|                 | DEPENDENT CLA<br>CFR 1.16(b))                                           | JMS /               | minus 3 =    |                   |                      |                    |                 | <del>                                     </del> | OR     |                                       | <u> </u>         |
|                 |                                                                         | ENT CLAIM PRESE     |              |                   |                      |                    | × \$=           |                                                  | OR     | × \$=                                 | -                |
| IMO             | JLTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))                        |                     |              |                   |                      |                    | + \$=           |                                                  | OR     | + \$=                                 |                  |
| • If            | If the difference in column 1 is less than zero, enter "0" in column 2. |                     |              |                   |                      |                    | TOTAL           |                                                  | OR     | TOTAL                                 | L                |
|                 | C                                                                       | LAIMS AS AN         | IENDE        | ) – PART          | 11                   |                    |                 |                                                  |        |                                       |                  |
|                 |                                                                         | (Column 1)          | mn 1) (1     |                   | Column 2) (Column 3) |                    | SMALL I         | ENTITY                                           | 07     | OTHER<br>SMALL                        | R THAN           |
| ∢               |                                                                         | CLAIMS<br>REMAINING |              | HIGHE             |                      | PRESENT            | RATE            |                                                  | $\vee$ |                                       |                  |
| AMENDMENT       |                                                                         | AFTER<br>AMENDMENT  | _            | PREVIO PAID F     | USLY                 | EXTRA              | MIE             | ADDI-<br>TIONAL<br>FEE                           |        | RATE                                  | TION             |
| <b>^  \</b>     | Total<br>(37 CFR 1.16(c))                                               | 108                 | Minus        | 10                | <u> </u>             |                    | x s = =         | 7                                                |        | , , , , , , , , , , , , , , , , , , , | FEE              |
| 1 🖁             | Independent<br>(37 CFR 1.16(b))                                         | 1. 6                | Minus        | 20                |                      |                    |                 | /                                                | OR     | × \$=                                 |                  |
| 🖁               | 1 17                                                                    |                     |              |                   |                      |                    | × \$=           | <u> </u>                                         | OR     | X \$=                                 |                  |
| <u> </u>        | FIRST PRESENTATION OF MULTIPLE DEPENDENT SLAHM (37 CFR 1.16(d))         |                     |              |                   |                      |                    | +\$             |                                                  | OR     | + \$=                                 |                  |
| 1               |                                                                         |                     | c            | see c             |                      |                    | TOTAL ADD'L FEE |                                                  | OR     | TOTAL<br>ADD'L FEE                    |                  |
|                 |                                                                         | (Column 1)          |              | (Colur            | nn 2)                | (Column 3)         |                 |                                                  |        |                                       |                  |
| 8               |                                                                         | CLAIMS<br>REMAINING |              | HIGHE<br>NUMB     |                      | PRESENT            | RATE            | ADDI-                                            |        | RATE                                  | ADDI             |
| I E             |                                                                         | AFTER<br>AMENDMENT  |              | PREVIO            |                      | EXTRA              |                 | TIONAL<br>FEE                                    |        | '"-                                   | TIONA            |
| Ž               | Total<br>(37 CFR 1.16(c))                                               | *                   | Minus        | **                |                      | =                  | x \$=           |                                                  | OR     | x s =                                 |                  |
| AMENDMENT       | Independent<br>(37 CFR 1.16(b))                                         | •                   | Minus        | ***               |                      | =                  | x \$=           |                                                  |        |                                       |                  |
| AM              | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))         |                     |              |                   |                      |                    |                 |                                                  | OR     | X \$=                                 |                  |
| H               | (a) CPR 1.10(d))                                                        |                     |              |                   |                      |                    | + \$=<br>TOTAL  |                                                  | OR     | + \$ =  <br>TOTAL                     |                  |
| 1               |                                                                         |                     |              |                   |                      |                    | ADD'L FEE       |                                                  | OR     | ADD'L FEE                             | _                |
| <u> </u>        |                                                                         | (Column 1)          |              | (Colum            |                      | (Column 3)         |                 |                                                  |        |                                       |                  |
| ပ               |                                                                         | CLAIMS<br>REMAINING |              | HIGHE<br>NUMBI    | ER                   | PRESENT            | RATE            | ADDI-                                            |        | RATE                                  | ADDI-            |
|                 |                                                                         | AFTER<br>AMENDMENT  |              | PREVIOL<br>PAID F |                      | EXTRA              |                 | TIONAL<br>FEE                                    |        |                                       | TIONA<br>FEE     |
| Ĭ Ņ             | Total<br>(37 CFR 1,16(c))                                               | *                   | Minus        | **                |                      | =                  | x \$=           |                                                  | OR     | x \$ =                                | 1 66             |
| AMENDMENT       | Independent<br>(37 CFR 1.16(b))                                         | •                   | Minus        | ***               |                      | =                  |                 |                                                  |        |                                       |                  |
| \(\frac{1}{2}\) | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))         |                     |              |                   |                      |                    | =               |                                                  | OR     | X \$=                                 |                  |
| -               | THOS TRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))          |                     |              |                   |                      |                    | + s = TOTAL     |                                                  | OR     | + \$=<br>TOTAL                        |                  |
| 1               |                                                                         |                     |              |                   |                      | e "0" in column 3. | ADD'L FEE       |                                                  | OR     | ADD'L FEE                             |                  |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.